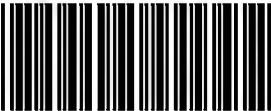


APPLICATION DATA SHEET

Electronic Version v14  
Stylesheet Version v14.0

Title of Invention	Extensible Decimal Identification System for Ordered Nodes		
Application Type : regular, utility Attorney Docket Number : SVL920030088US1			
Correspondence address: Customer Number: 26381			
			
Inventors Information:			
<u>Inventor 1:</u>			
Applicant Authority Type:		Inventor	
Citizenship:		US	
Given Name:		Kevin	
Middle Name:		Scott	
Family Name:		Beyer	
Residence:			
City of Residence:		San Jose	
State of Residence:		CA	
Country of Residence:		US	
Address-1 of Mailing Address:		396 Palm Ridge Lane	
Address-2 of Mailing Address:			
City of Mailing Address:		San Jose	
State of Mailing Address:		CA	
Postal Code of Mailing Address:		95123	
Country of Mailing Address:		US	
Phone:			
Fax:			
E-mail:			
<u>Inventor 2:</u>			
Applicant Authority Type:		Inventor	
Citizenship:		US	
Given Name:		Robert	
Middle Name:		William	

**Family Name:** Lyle  
**Residence:**  
**City of Residence:** Morgan Hill  
**State of Residence:** CA  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 18150 Barnard Road  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Morgan Hill  
**State of Mailing Address:** CA  
**Postal Code of Mailing Address:** 95037  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

Inventor 3:

**Applicant Authority Type:** Inventor  
**Citizenship:** CA  
**Given Name:** Edison  
**Middle Name:** Lao  
**Family Name:** Ting  
**Residence:**  
**City of Residence:** San Jose  
**State of Residence:** CA  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 3261 Lac Bleu Court  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** San Jose  
**State of Mailing Address:** CA  
**Postal Code of Mailing Address:** 95148  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

Assignee 1:

**Organization Name:** International Business Machines Corporation  
**Address-1 of Mailing Address:** New Orchard Road  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Armonk  
**State of Mailing Address:** NY

Postal Code of Mailing Address:	10504
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	